Application or Docket Number

Effective October 1, 2003													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			110					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			ILO minus 20=		*	90		X\$ 9=		1	X\$18=		
INE	DEPENDENT C	LAIMS	ہے۔ minus 3 =		*.					OR			
_		NDENT CLAIM P						X43=		OR	X86=		
L				•				+145=		OR	+290=		
* If	the difference	in column 1 is	ess than zero, enter "0" in column 2			olumn 2	•	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN					
_		1	(Colum		(Column 3)	r	SMALL		OR 1 I	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
۱ ۱۷ ما								TOTAL			TOTAL		
	(Column 1) (Column 2) (Column							DDIT. FEE		OR,	ADDIT. FEE		
MENDMENT B		CLAIMS HIGHE			(Column 3)	Г	<u>-</u>	ADDI-		-	ADDI-		
		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	r	X43= ·		OR	X86=		
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-					
								+145=		OR	+290=		
								TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST													
Z .	`	CLAIMS REMAINING AFTER AMENDMENT	·	NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	H	X43=			X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							7452		OR	700-		
t If the option is solver 1 is been then the setting of the 20 is a time 0										OR	+290=		
***!	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***OR **ADDIT. FEE**  ***OR **ADDIT. FEE*												
٠ ٦	he "Highest Num	ber Previously Paid	For" (Total or	Independer	nt) is the	highest number	foun	d in the app	ropriate box	in colu	ımn 1.		